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	DECL	ARA	TIC	ON AND	Attorney Docket Number	21148		
POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION					First Named Inventor	Yu Ren		
					COMPLETE IF KNOWN			
(37 CFR 1.63)				(3)	Application Number			
X	Declaration Declaration		Declaration Submitted after Initial	Filing Date				
with Initial OR Filing (surcharge Filing (37 CFR 1.16 (e))	Filing (surcharge (37 CFR 1.16 (e))	Group Art Unit						
				required)	Examiner Name			

As a below named inventor	r, I hereby declare t	that:									
My residence, post office address, and citizenship are as stated below next to my name.											
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
ACTIVE SALT FORMS WITH TYROSINE KINASE ACTIVITY											
(Title of the Invention) the specification of which											
bears the Attorney Docket Number and Title of the Invention noted above											
OR is attached hereto OR											
was filed on (MM/DD/	YYYY)		as United States Applicat	ion Number or PCT Internation	nal						
Application Number			nded on (MM/DD/YYYY)	` ••	plicable).						
I hereby state that I have rev amended by any amendment				pecification, including the clai	ms, as						
as defined in 37 CFR 1.56, i	ncluding for continu	ation-in-p	art applications, material info	nown to me to be material to pormation which became availab	ole betwee	•					
certificate(s), or 365(a) of any America, listed below and ha	y PCT international a ve also identified be	applicatior low, by ch	n which designated at least or ecking the box, any foreign a	y foreign application(s) for pat ne country other than the Unite application for patent or invent on which priority is claimed.	d States o	of					
Prior Foreign Application	Country		Foreign Filing Date	Attorney Docket Number	Priority (						
Number(s)	Country		(MM/DD/YYYY)	Attorney Docket Number	YES	NO					
					<del>                                     </del>						
						<u> </u>					
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:											
I hereby claim the benefit under	35 U.S.C. 119(e) of an	y United Sta	ates provisional application(s) lis	ted below.							
Filing Date Application Number(s) (MM/DD/YYYY) Attorney Docket Number											
60/398,236	07/24/20	002	21148PV								

## **DECLARATION AND POWER OF ATTORNEY** for Utility or Design Patent Application

designating is not disclose 35 U.S.C. 11	m the benefit under the United States of sed in the prior United It. It acknowledge which became a application.	of America nited States the duty to	, liste or Po discl	d below CT inter lose infe	v and, in rnational ormation	sofar : l appli n knov	as the sication	ubje in th ne to	ect matter ne manner be mater	of each r providi ial to pa	of the ed by t tentabi	claims o he first p ility as d	f this applic paragraph of efined in	ation
U.S. Parent Application or PCT Parent Application Number							Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)			
	Application	Number					(141141)	0.0/1	111)			(у иррисионе)		
Addition	al U.S. or PCT inter	national app	licatio	n numbe	rs are list	ed on a	a supple	ment	al priority	data shee	t PTO/S	SB/02B at	tached hereto.	
	iventor, I hereby app stered practitioner(s													
connected the		Customer	Num	ber								ce Custor Code La	ner Number	÷
	X	OR Registere	d prac	titioner(	s) name/r	egistra	tion nu	mber	listed belo	w		Coue Lu		J
	Name			Regist Nun	ration nber				Na	ıme				tration mber
Dianne Brown			42,0	68										
Mark R. Daniel			31,9	13										
Direct all cor	respondence to:	X Custon	mer N	lumber (	or Bar C	ode L	abel	在	0002	210				
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Country	USA			Tele	phone	(732)	594-12	49 Fax (732				(732)5	)594-4720	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.														
Name of Sole o	r First Inventor:						A pe	etitio	n has bee	n filed f	or this	unsigne	d inventor	
-	ven Name (first	and midd	le [if	any])			_		F	amily l	lame (	or Surna	ame	
Yu Inventor's						I	Ren				1			
Signature	Render Date 22 Apr 2003									3				
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Post Office Address	Merck &	Co., Inc.,	P.O. I	Box 200	00									
City	Rahway State NJ ZIP 07065-0907													
X Additional	inventors are being	named on the	ne <u>1</u>	supp	lemental	Additio	onal Inv	entor	rs(s) sheet(	s) PTO/S	B/02A	attached l	nereto.	

## **DECLARATION AND POWER OF ATTORNEY**

## ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Addition			A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])						Family Name or Surname						
Shyam B.						Karki						
Inventor's Signature	Shyam B. Kurli								Date	22nd	April 2003	
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City		Rahway			Sta	State NJ			ZIP	07065-0907		
Name of Addition	al Jo	oint Inventor, if any:				A petition has been filed for this unsigned inventor						
Give	n Na	me (first and middle [if	any])			Family Name or Surname						
Matthew M.					Z	hao						
Inventor's Signature		Macc		/c-					Date	28-A	pol-res	
Residence: City	Edis	son	State	NJ		Cou	ntry	US		Citizenship	us	
Post Office Address	Merck & Co., Inc., P.O. Box 2000											
City		Rahway				State NJ			ZIP	07065-090	7	
		oint Inventor, if any:		A petition has been filed for this unsigned inventor								
Give	n Na	me (first and middle [if	any])	any]) Family Name or Surname								
Mark T.				Bilodeau								
Inventor's Signature		MushT. Bi	61						22 A	PR 2003		
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City		Rahway			Sta	State NJ		ZIP		07065-0907		
Name of Additional Joint Inventor, if any:						] A	petitio			or this unsigned		
Given Name (first and middle [if				any])				F	amily Na	me or Surnan	ne ·	
Inventor's Signature									Date			
Residence: City						Country				Citizenship		
Post Office Address												
City					Sta	te			ZIP			